



CalWORKs Housing Support Program Referral

SECTION 1 - CalWORKs CASE WORKER INFORMATION

Worker Name: _____	Referral Date: _____
Worker Number: _____	Telephone Number: _____
Region: <u>Select Region</u>	Fax Number: _____

SECTION 2 - CASE INFORMATION

Last Name: _____	First Name: _____	CalWIN Case #: _____
Telephone Number: _____	Primary Language: <u>Select Language</u>	Aid Code: _____

SECTION 3 - HOUSEHOLD INFORMATION

Total # of Persons in Household: _____	Number of Adults: _____
Total Monthly Household Income: _____	Number of Children: _____
Work Status: <u>Select Status</u>	

SECTION 4 - REASON FOR REFERRAL

<input type="checkbox"/> Lacking a fixed and regular nighttime residence. Currently residing at: _____
<input type="checkbox"/> Primary nighttime residence is a supervised publically or privately operated shelter as temporary living accommodations. Name of Shelter: _____
<input type="checkbox"/> Residing in a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation. Currently Residing at: _____
<input type="checkbox"/> In receipt of a judgment for eviction, as ordered by a court. Eviction Date: _____
Client Declaration of Homelessness Status:
<input type="checkbox"/> I certify, under penalty of perjury, that the information above is true and correct:
Client Signature: _____ Date: _____
<u>Select Signature Status</u>
Comments:
<div style="border: 1px solid black; height: 60px;"></div>

SECTION 5 - HOUSING REPRESENTATIVE RESPONSE

Housing Representative Name: _____	Date: _____
Phone Number: _____	
Referral/Assessment Status: <i>(Check all that apply)</i>	
<input type="checkbox"/> Referral Accepted	<input type="checkbox"/> Assessment conducted on: _____
<input type="checkbox"/> Did not meet HSP referral criteria	<input type="checkbox"/> Re-directed to other resources
<input type="checkbox"/> HSP funding not available	<input type="checkbox"/> Unable to make contact
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Moved out of County
	<input type="checkbox"/> Non-compliant with services
	<input type="checkbox"/> No longer CalWORKs recipient